COMPLIANCE CHECKLIST

▷ **Nuclear Medicine**

The following Checklist is for plan review of hospital facilities, and is derived from the AIA/HHS Guidelines for Design and Construction of Hospital and Health Care Facilities, 2001 Edition (specific sections indicated below), appropriately modified to respond to DPH requirements for projects in Massachusetts which include Hospital Licensure Regulations 105 CMR 130.000. Applicants must verify project compliance with all the requirements of the Guidelines, Licensure Regulations & Policies when filling out this Checklist, and must include the DPH Affidavit when submitting project documents for self-certification or abbreviated review.

Other jurisdictions, regulations and codes may have additional requirements which are not included in this checklist, such as:

- NFPA 101 Life Safety Code and applicable related standards contained in the appendices of the Code.
- 708 CMR, the State Building Code.
- Joint Commission on the Accreditation of Health Care Organizations.
- CDC Guidelines for Preventing the Transmission of Mycobacterium Tuberculosis in Health Care Facilities.
- Accessibility Guidelines of the Americans with Disabilities Act (ADA).
- Architectural Access Board.
- Local Authorities having jurisdiction.

Instructions:

1. The Checklist must be filled out completely with each application.
2. Each requirement line (___) of this Checklist must be filled in with one of the following codes, unless otherwise directed. If an entire Checklist section is affected by a renovation project, "E" for existing conditions may be indicated on the requirement line (___) next to the section title (e.g. _E_ PATIENT ROOMS). If more than one space serves a given required function (e.g. patient room or exam room), two codes separated by a slash may be used (e.g. "E/X"). Clarification should be provided in that regard in the Project Narrative.

X = Requirement is met.

☒ = Check this box under selected checklist section titles or individual requirements for services that are not included in the project.

E = Functional space or area is existing and not affected by the construction project; this category does not apply if the existing space or area will serve a new or relocated service or if the facility is currently not licensed & applying for licensure.

W = Waiver requested for Guidelines, Regulation or Policy requirement that is not met (for each waiver request, complete separate waiver form & list the requirement ref. # on the affidavit).

3. Mechanical, plumbing and electrical requirements are only partially mentioned in this checklist.
4. Oxygen, vacuum & medical air outlets are identified respectively by the abbreviations "OX", "VAC" & "MA".
5. Items in italic, if included, refer to selected recommendations of the Appendix of the Guidelines, adopted by policy.
6. Requirements referred to as "Policies" are DPH interpretations of the AIA Guidelines or of the Regulations.

Facility Name:

.....

Facility Address:

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Satellite Name: (if applicable)

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Satellite Address: (if applicable)

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Project Reference:

.....

.....

Dates:

Initial: .....

Revisions: .....

DON Identification: (if applicable)

.....

Building/Floor Location:

.....

.....

		ARCHITECTURAL REQUIREMENTS	MECHANICAL/PLUMBING/ ELECTRICAL REQUIREMENTS
7.11.A	___	PROCEDURE ROOMS	
		___ equipped & sized to accommodate functional program	___ Handwashing station
7.11.C		___ floor/wall finish materials easily decontaminated in case of radioactive spills	___ Vent. min. 6 air ch./hr ___ Vents for radioactive gases
7.11.E	___	SHIELDED RADIOPHARMACY	
		☐ check if service not included in project	
		___ space for storage of radionuclides, chemicals for preparation, dose calibration	___ Handwashing station ___ Vents & traps for radioactive gases
		___ space for record keeping	
		___ floor/wall finish materials easily decontaminated in case of radioactive spills	___ Vent. min. 6 air ch./hr ___ negative pressure ___ air directly exhausted to outdoors
7.11.G	___	SUPPORT SPACES	
		(may be shared with Imaging Suite)	
7.11.G1		___ Adequate space for entry of stretchers and beds, and location of imaging and computer equipment	
7.11.G2		___ On-site darkroom for film processing	___ Vent. min. 10 air ch./hr (exhaust)
		___ protective storage for unexposed film	
7.11.G4		___ Provisions for cleanup located within suite	___ Service sink or floor receptor
		___ storage for housekeeping equipment & supplies	___ Vent. min. 10 air ch./hr (exhaust)
7.11.G5		___ Film storage for retrieval of patient films	
7.11.G6		___ Secure storage for inactive patient films	
7.11.G7		___ Consultation area	
7.11.G8		___ Offices for physicians & assistants for consultation, viewing & charting of film	___ View boxes with consistent lighting for comparison of several adjacent films
7.11.G9		___ Clerical offices & spaces	
7.11.G10		___ Waiting areas	
		___ out of traffic and under staff control	
		___ separate inpatient & outpatient areas	
7.11.G11		___ Dose administration area	___ Vent. min. 6 air ch./hr (exhaust)
		___ located near preparation area	
		___ visual privacy	
7.11.G12		___ Inpatient stretcher holding area	
Policy		___ under staff control	___ piped or portable OX & VAC (Policy)
		___ privacy curtains	
		___ staff access clearance on each side of stretchers	
7.11.G13		___ Patient dressing rooms	
		___ convenient to waiting area & procedure room	
		___ seat or bench and mirror	
		___ provisions for hanging clothes	
		___ provisions for secure storage of valuables	
7.11.G14		___ Patient toilet rooms	___ Handwashing station
		___ located near waiting & procedure rooms	___ Vent. min. 10 air ch./hr (exhaust)
7.11.G15		___ Staff toilet(s)	___ Handwashing station
		___ convenient to nuclear medicine lab	___ Vent. min. 10 air ch./hr (exhaust)
7.11.G17		___ Control desk & reception area	
7.11.G18		___ Clean linen storage area	___ Handwashing station ___ Vent. min. 2 air ch./hr
7.11.G19		___ Provisions for holding soiled material	___ Handwashing station
		___ Separate provisions for contaminated holding	___ Vent. min. 10 air ch./hr (exhaust)

		ARCHITECTURAL REQUIREMENTS	**MECHANICAL/PLUMBING/ ELECTRICAL REQUIREMENTS**
7.11.F	___	POSITRON EMISSION TOMOGRAPHY (PET)	
		☐ check if service not included in project	
A7.11.F		___ *Scanner room*	___ Handwashing station
		___ *min. 300 sf*	___ Vent. min. 6 air ch./hr
		Cyclotron room	___ Vent. min. 6 air ch./hr
		☐ *check if service not included in project*	
		___ *min 225 sf*	
		___ *space for safe long term cool-down storage*	
		___ *min. 16 sf*	
		___ *Radioactive lab*	___ Vent. min. 10 air ch./hr
		___ *min. 250 sf*	___ negative pressure
			___ air directly exhausted to outdoors
		___ *Non-radioactive labs*	
		___ *min. 250 sf*	___ Vent. min. 6 air ch./hr
		___ *Blood lab*	
		___ *min. 80 sf*	___ Vent. min. 6 air ch./hr
A7.11.F		___ *Patient holding area with space for 2 stretchers*	
Policy		___ under staff control	___ piped or portable OX & VAC (Policy)
		___ privacy curtains	
		___ staff access clearance on each side of stretchers	
		___ *Gas storage area*	___ *Gas piping to cyclotron or lab*
		___ *adequate space to accommodate bottles of gas*	___ *Ventilation adequate for occupancy*
7.11.H		RADIOTHERAPY SUITE	
		☐ check if service not included in project	
		___ Simulator room	___ Vent. min. 6 air ch./hr
7.11.H4		___ sized to accommodate equipment & staff and service access to equipment & patient	
A7.11.H4		___ *min. 260 sf of area for simulator room*	
		___ Linear accelerator room	
		☐ check if service not included in project	
7.11.H4		___ sized to accommodate equipment & staff and service access to equipment & patient	___ Vent. min. 6 air ch./hr
A7.11.H4		___ *min. 680 sf of area for lin. ac. room with maze*	
7.11.K1		___ mold room	___ Handwashing station
			___ Exhaust hood
7.11.K2		___ block room (may be combined with mold room)	
		___ storage facilities	
		___ Cobalt room	
		☐ check if service not included in project	
7.11.H4		___ sized to accommodate equipment & staff and service access to equipment & patient	___ Vent. min. 6 air ch./hr
A7.11.H4		___ *min. 450 sf of area for cobalt room with maze*	
7.11.L1		___ hot lab	___ Vent. min. 6 air ch./hr
			___ negative pressure
			___ air directly exhausted to outdoors

		ARCHITECTURAL REQUIREMENTS	MECHANICAL/PLUMBING/ ELECTRICAL REQUIREMENTS
7.11.I	___	Radiotherapy Support Areas (may be shared with other departments)	
7.11.I1		___ Inpatient stretcher holding area ___ under staff control ___ privacy curtains ___ staff access clearance on each side of stretchers	___ piped or portable OX & VAC (Policy)
7.11.I2		___ Exam room for each treatment room ___ min. 100 sf	___ Handwashing station ___ Vent. min. 6 air ch./hr
7.11.I3		___ Darkroom ___ convenient to treatment rooms & quality control	___ Sink for cleaning of processor racks ___ Vent. min. 10 air ch./hr (exhaust)
7.11.I4		___ Patient gowning area ___ safe storage for clothing and valuables ___ at least 1 changing space for assisted dressing	
7.11.I5		___ Business office and/or reception/control area	
7.11.I6		___ Housekeeping room ___ storage for equipment and supplies	___ Service sink or floor receptor ___ Vent. min. 10 air ch./hr (exhaust)
7.11.I7		___ Film file area	
7.11.I8		___ storage area for unprocessed film	
7.11.J		OPTIONAL SUPPORT AREAS ☐ check if services not included in project	
7.11.J1		___ Quality control area	___ View boxes with consistent lighting
7.11.J2		___ Computer control area ___ located outside entry to treatment rooms	
7.11.J3		___ Dosimetry equipment area	
7.11.J4		___ Hypothermia room	___ Vent. min. 6 air ch./hr
7.11.J5		___ Consultation room	
7.11.J6		___ Oncologist's office	
7.11.J7		___ Physicist's office	
7.11.J8		___ Treatment planning & record room	
7.11.J9		___ Work station/nutrition station	

GENERAL STANDARDS

Details and Finishes

Inpatient corridors

▹ New/Extensive Construction
___ min. corridor width 8'-0" (NFPA 101)

▹ Limited Renovations
___ corridor width unchanged or increased

Staff corridors

___ min. corridor width 5'-0" (7.28.A2)

___ Fixed & portable equipment recessed does not reduce required corridor width (7.28.A3)

___ Work alcoves include standing space that does not interfere with corridor width

☐ check if function not included in project

Doors (7.28.A6-A9):

___ doors to rooms used for stretchers or wheelchairs min. 2'-10" wide

___ all doors are swing-type

___ outswinging/double-acting doors for toilet rooms

___ doors do not swing into corridor

___ Operable windows (7.28.A10):

☐ check if all windows are fixed

___ window operation prohibits escape or suicide

___ insect screens

___ Glazing (7.28.A11):

___ safety glazing or no glazing under 60" AFF & within 12" of door jamb

___ Linen & refuse chutes min. int. dim. 2'-0" (7.28.A12)

☐ check if service not included in project

___ Thresholds & exp. joints flush with floor surface

___ Grab bars at all patient toilets (7.28.A14)

___ 1½" wall clearance

___ 250 lb. capacity

___ Handwashing sinks anchored to withstand 250 lbs.

Vertical clearances (7.28.A20):

___ ceiling height min. 7'-10", except:

___ 7'-8" in corridors, toilet rooms, storage rooms

___ sufficient for ceiling mounted equipment

min. clearance under suspended pipes/tracks:

___ 7'-0" AFF in bed/stretcher traffic areas

___ 6'-8" AFF in other areas

Floors (7.28.B4):

___ floors easily cleanable & wear-resistant

___ non-slip floors in wet areas

___ wet cleaned flooring resists detergents

Walls (7.28.B6):

___ wall finishes are washable

___ smooth/water-resist. finishes at plumbing fixtures

Mechanical (7.31.D)

___ Mech. ventilation provided per Table 7.2

___ Exhaust fans located at discharge end

___ Fresh air intakes located at least 25 ft from exhaust outlet or other source of noxious fumes

___ Contaminated exhaust outlets located above roof

___ Ventilation openings at least 3" above floor

___ Central HVAC system filters provided per Table 7.3

Plumbing (7.31.E)

Handwashing station equipment

___ handwashing sink

___ hot & cold water

___ single lever or wrist blades faucet

___ soap dispenser

___ hand drying facilities

Sink controls (7.31.E1):

___ hands-free controls at all handwashing sinks

___ blade handles max. 4½" long

___ blade handles at scrub, clinical sinks min 6" long

___ Medical gas outlets provided per 7.31.E5 & Table 7.5

Electrical (7.32)

___ All occupied building areas shall have artificial lighting (7.32.D2)

___ Duplex, grounded receptacles max. 50 feet in corridors, max. 25 feet from end wall (7.32.E3)

___ Emergency power (7.32.H)

___ emergency power provided to all essential services complies with NFPA 99, NFPA 101 & NFPA 110

___ emergency power source provided with fuel capacity for continuous 24-hour operation